

DCPS “Capital Gains” Program Opt-Out Form

Dear Parents,

We are pleased to let you know that your child has the opportunity to participate in the “Capital Gains” Program. By taking part, your child can earn up to **\$1,500** this year for good performance in school (schoolwork, attendance, behavior). The reward plan is explained in the Chancellor’s letter introducing the program. Participation in the program is completely voluntary, and there is no penalty if your child does not participate. ***To maximize the number of participating students, DCPS is enrolling students in the program unless their parents notify DCPS that they do not want their children to participate. if you do not sign and return this form, your child will be in the program. DCPS will provide researchers led by Prof. Roland Fryer, Harvard University, who are evaluating the program, with information from the transcripts of both participating and non-participating students. All information will be kept strictly confidential.***

If you choose to have your child participate, your child can win rewards of money every two weeks. DCPS strongly recommends that the rewards be deposited in a student bank account. More information on the savings accounts is attached. Bank account applications will be sent home in the following weeks. If your child does not return a completed bank form to open an account, we will send his/her reward to the school in a personal check. All students will receive personal checks for the first two reward disbursements to allow time for the accounts to open. *Please understand that your child will get his/her rewards much more quickly and safely by opening a savings account.*

If your child participates, s/he may be asked by the researchers to give feedback through surveys and small group discussions to help us evaluate the program. No teachers or parents will have access to these responses. All information will be kept strictly confidential. Your child’s name will not be used in any report. *There will be no penalty if your child refuses to participate or withdraw at any time.*

For more information, please contact your school . The researchers can be contacted by email at evan.smith@dc.gov **Important: If your child transfers to a school not in the “Capital Gains” program we will not be able to reward them for their performance.**

_(Please return this form to your school administrator if you do not want your child to participate. Keep the form for your records if your child will participate)

_____ I DO NOT WANT MY CHILD TO PARTICIPATE IN THE “CAPITAL GAINS” PROGRAM

Parent/Guardian signature: _____ Date: _____

Name of child (please print clearly): _____

Child date of birth (MM/DD/YYYY): _____ Phone: (____) _____

School name: _____ Grade: _____

Whom to contact about your rights in this research, for questions, concerns, suggestions, or complaints that are not being addressed by the researcher, or research-related harm:

Harvard University Committee on the Use of Human Subjects in Research, 50 Church St., 5th floor, Cambridge, MA 02138. Phone: 617-495-5459. E-mail: cuhs@fas.harvard.edu